•									Application or Docket Number			
PATENT APPLICATION FEE DETERMINATION RECORD												
Effective October 1, 2003												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER SMALL	
T	OTAL CLAIMS			10			ŀ	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FI	SE 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			(S minus 20=		. 30			X\$ 9=			X\$18=	30
INDEPENDENT CLAIMS			<b>o</b> minus 3 =					X43=		OR	X86=	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					445	+ .	1	+290=	
• If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR		1740
								TOTAL	·	OR	TOTAL	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALI	ENTITY	OR	OTHER SMALL	
AMENDMENT A	1/10	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	.50	Minus		0			X\$ 9=		<b>O</b> R	X\$18=	
	Independent	. 9	Minus	••• {	}	• \		X43=		OR	X86=	·
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM			4.05	1		+290=	
								+145=		OR	TOTAL	
								ADDIT. FEI		OR	ADDIT. FEE	
_		(Column 1)		(Colun		(Column 3)	1 .					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 24	Minus	<b>-</b> 5	0	= '		X\$ 9=		OR.	X\$18=	ľ
	independent	• 5	Minus	***	8	=		X43=		OR	X86=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+145=			+290=	
L								TOTAL	ļ	OR	TOTAL	
•								ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)		(Coluit		(Column 3)	۔ ا					
MEN		REMAINING AFTER AMENDMENT	·	NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total.	•	Minus	0.0		<b>.</b>		″X\$ 9=		OR	X\$18=	7
	Independent	•	Minus	***		<i>s</i>	<b> </b>	X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM							
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.												
	the Highest Nur	nter Previously Painter of Previously Painter of Previously Painter	d For IN THIS	S SPACE IS	less than	20, enter "20."	A	TOTAL DDIT. FEE		OR ,	TOTAL LODIT, FEE	
		ber Previously Paid					r fou	nd in the ap	propriate box	in coh	uma 1.	Ī

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